

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10579235		FILING DATE				
APPLICANT(S)													
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓		✓				51						
2	✓		✓				52						
3		2		✓			53						
4		1		✓			54						
5		1		✓			55						
6		1		✓			56						
7		1		✓			57						
8	✓		✓				58						
9				✓			59						
10				✓			60						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3	↓	3	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	6	←	9	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	9		12				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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